



SCHOLARSHIP APPLICATION FORM

The application form must be typed or neatly printed and completed accurately. The Scholarship Selection Committee reserves the rights to reject incomplete or illegible applications.

PERSONAL			
Name: _____			
Permanent Address: _____			
City: _____	State: _____	Zip: _____	
Date of Birth: _____	Telephone: _____		
E-Mail Address: _____			
Citizenship:	US <input type="checkbox"/>	Other <input type="checkbox"/>	
Educational Status:	High School Student <input type="checkbox"/>	College Student <input type="checkbox"/>	
	Expected Date of Graduation: _____	Expected Date of Graduation: _____	
Current GPA: _____	GPA Scale: _____		
SAT Score: _____	ACT Score: _____		
Academic Major : _____	Planned <input type="checkbox"/>	Current <input type="checkbox"/>	

ACADEMIC			
High School: _____			
Address: _____			
City: _____	State: _____	Zip: _____	
College/University: _____			
Address: _____			
City: _____	State: _____	Zip: _____	
Applications for admission have sent to the following colleges/universities:			

ACHIEVEMENTS (Attach additional pages if necessary)			
Academic Awards/Achievements			

Activities/Community Interests (Please provide detailed descriptions of all extracurricular activities, community involvement and work/study programs.)			

Personal Achievements

PERSONAL REFERENCES			
Please provide 3 references with contact info:			
<ul style="list-style-type: none"> • One reference from school teacher or principal • One reference from a relative other than parents • One reference from a friend 			
Name	Profession	Relationship	Phone
<input type="checkbox"/> References are attached.			
<input type="checkbox"/> References have been requested from the above individuals and will be sent directly to E ² G.			

OTHER REQUIRED DOCUMENTS	
My official high school or college transcript has been requested.	<input type="checkbox"/>
My essay of interest (maximum of 200 words) is enclosed/attached.	<input type="checkbox"/>
All hard copies must be neatly printed or typed. If attaching an electronic copy, please send in MSWord or Adobe Acrobat format.	<input type="checkbox"/>

I certify that the above information is true and complete. I understand that providing false information will disqualify me from the academic scholarship selection process.

Signature: _____

Date: _____